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TRAVEL		SE CLAIM		See	Instructio	ons and *Pr	ivacy								
ELECTRONIC STD. 262 (REV. 04/95) Statement O				n Reverse Side						of	Pages				
CLAIMANT'S NAME					SSAN OR EMPLOYEE NUMBER*					DEPARTMENT					
	R. Bette	nhausen									Calif	ornia Em	ergency Ma	-	ement A
POSITION	.,			E99	BER	Executiv							INDEX NUMBE	.K	
Secretary E99 RESIDENCE*			HEADQUARTERS ADDRESS 3650 Schriever Ave.							TELEPHONE NUMBER					
NEODENGE										916-324-8908					
CITY Sacrame	ento		STATE CA	ZIP	95833	Mather				-		STATE CA		956	355
(1) MONTH/YE	AR	LOCATION	(4)	(5)	MEALS	1	(6)	(7)		SPORTATIO			(8)		(9)
March 201	0	WHERE EXPENSES	LODGING			0.T., UT,		(A) COST OF	(B)	(C)	PRIVA1	(D) E CAR USE	BUSINESS		TOTAL
(2) DATE	TIME	WERE INCURRED		BREAK- FAST	LUNCH	O.T., L/T, N/C, RELO. OR DINNER	INCIDEN- TALS	TRANS.	USED	TOLLS, PARKING	MILES	AMOUNT	EXPENSE		OR DAY
15-Mar	19:00	Sacramento to Los Angeles	\$ 126.57						RC	\$ 13.00				\$	139.57
		Los Angeles to							-					\$	25.00
16-Mar	18:30	Sacramento		\$ 6.00	\$ 10.00			<u> </u>	sc	\$ 9.00	-			*	23.00
18-Mar		Sacramento Sacramento to Los									-		\$ 120.00	\$	120.00
18-Mar	14:00	Angeles	\$ 125.47			\$ 18.00			RC	\$ 31.00				\$	174.47
		Los Angeles to													
19-Mar	14:10	Sacramento		\$ 6.00	\$ 10.00		\$ 6.00	\$ 5.88	SC	\$ 9.00	-		-	\$	36.88
25-Mar	20:00	Sacramento to Mountain View	\$ 145.29					\$ 53.21	sc					\$	198.50
26-Mar	14:00	Mountain View to Sacramento		\$ 6.00	\$ 10.00									\$	16.00
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(10)						6 49.00	\$ 6.00	\$ 59.09		\$ 62.00			\$ 120.00	\$	710.42
COLLIMNIC	SUBTOT	G. USE ONLY)	\$ 397.33	\$ 18.00	\$ 30.00	\$ 18.00	\$ 6.00	3 33.03		9 02.00	-			MCA(
JOLDINIYO	ODL (AGO!	Valet Pa	A Bin O	Pralis	Parl	3100	O No i O	01.00)				T	6	740.42
	CLAIM TO	JIAL			Tour	eing	avace	<u>uuu</u>			(12) NOR	MAL WORK HO	URS	-	710.42
21 C. C. C. M. C.		MARKS AND DETAILS (Attached olink Symposium; Attend			r Declara	tion meeting						9:00 - 6	:00		\sim
3/18: IACP											(13) PRIV	ATE VEHICLE L	JCENSE NUMBER		
		Chief retirement event.									(14) MILE	48.5¢/N			MOS
3/26: Spea	k at Disast	er Response and Emerge	ency Services	Workshop	; used per	rsonal credit	card to add	I fuel			AGEN		INTING OFFICE		
o state issued vehicle as voyager card didn't work.											USE ONLY PAID BY REVOLVING FUND CHECK NUMBER				
a minatalu mur	and vahicle was	e above is a true statement of the tray used, and if milage rates exceed the r	minimun rate. I certifi	the cost of op	erating the veh	icle was equal to	or greater than th	e rate							
laimed, and tha	t I have met the	requirements as prescribed by SAM S	Section 0750, 0751, 0	752, 0753, and	0754 pertaining	to vehicle safety	and seat belt us	ige.	TRAVE	L ANT	v1.L		DAJE /		
*				. 114	0 10								0151	PI	0
17) SIGNATU	RE AND TITL	E OF AL	EYPENSES TOUS			1	11111	À					DATE		
*			-	_=		- 4	5/6/10	,							